MIDWEST NETWORK ALLIANCE NETWORK
PAYER NOTICE

MIDWEST NETWORK ALLIANCE

The Midwest Network Alliance wishes to inform you of a new arrangement with a Payer or of changes in an existing arrangement with a Payer. Issued 12/28/2022.

The Midwest Network Alliance Network has entered an agreement with Kearney Regional Medical Center to offer three medical plans to its employees effective Jan. 1, 2022. The plan includes a PPO offering and a Qualified High Deductible Health Plan.

AGREEMENT: KEARNEY REGIONAL MEDICAL CENTER EMPLOYEE PLAN

EFFECTIVE DATE: **1/1/2022**

EST. NUMBER OF COVERED LIVES: **1,500**

FEE SCHEDULES: **MIDWEST NETWORK ALLIANCE**

THIRD-PARTY ADMINISTRATOR: **FIRST CHOICE HEALTH**

PHARMACY BENEFIT MANAGER: **EMSANA RX**

BENEFIT DESIGN

TIERS
- Tier One: Domestic and Midwest Network Alliance Direct Contracts
- Tier Two: Wrap Networks
- Tier Three: OON

MEDICAL PLANS
- One, PPO
- One, QHDHP

KEARNEY REGIONAL Medical Center

BENEFIT: PPO #1	Tier I	Tier II	Tier III
Deductible (S/F)	$1,000/$2,000	$2,000/$4,000	$5,000/$10,000
Coinsurance	10%	30%	50%
Out-of-Pocket	$3,000/$6,000	$4,500/$9,000	$10,000/$20,000

BENEFIT: QHDHP	Tier I	Tier II	Tier III
Deductible (S/F)	$2,400/$4,000	$3,375/$6,000	$5,000/$10,000
Coinsurance	0%	0%	50%
Out-of-Pocket	$2,400/$4,000	$3,375/$6,000	$10,000/$20,000

SAMPLE ID CARDS

KEARNEY REGIONAL Medical Center

Member

Member Name: JOHN SAMPLE

Member ID: SMPL00-01

Group Name: Kearney Regional Medical Center

Group #: A9700

Pharmacy Plan

Rx BIN: 025060
Rx PCN: EMRX
Rx GROUP: EMRX

em|sanaRx

Rx Customer Service: (888) 460-1579
https://emsanarx.myrxplan.com

Plan Information

Plan Name: PPO Plan

Medical Deductibles:
                              Individual / Family
Tier 1: $1,000 / $2,000
Tier 2: $2,000 / $4,000
Tier 3: $5,000 / $10,000

Medical / Rx Out-of-Pocket:
                              Individual / Family
Tier 1: $3,000 / $6,000
Tier 2: $4,500 / $9,000
Tier 3: $10,000 / $20,000

Contact Information

First Choice Health Customer Service:
(833) 375-0129
www.fchn.com/mfc

Pre-Authorizations: (800) 808-0450
Behavioral Health: (800) 640-7682
Out-of-Network Providers: (833) 375-0121

Pre-authorization: Inpatient admissions and certain outpatient services require pre-authorization. Please refer to your Summary Plan Document for details.

Medical Claims Submission

EDI Payor ID: 91131

First Choice Health
PO Box 12659
Seattle, WA 98111-4659

This card does not guarantee coverage. If you have any questions regarding benefit coverage, claims, or eligibility please call First Choice Health or visit www.fchn.com.

Networks

KEARNEY REGIONAL
www.kearneyregional.com

Midwest Network Alliance
MidwestNetworkAlliance.com

MidlandsChoice
www.midlandschoice.com

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